



**ARIZONA STATE SENATE**  
*Fifty-Fourth Legislature, First Regular Session*

**AMENDED**  
FACT SHEET FOR S.B. 1040

maternal fatalities; morbidity; report  
(NOW: maternal morbidity; mortality; report)

Purpose

An emergency measure that establishes the Advisory Committee on Maternal Fatalities and Morbidity (Committee) and specifies Committee membership, requirements and duties.

Background

Established in 1993, the Child Fatality Review Team (CFRT) was formed to reduce preventable child fatalities through the creation of preventative strategies, interdisciplinary training, community-based education and data-driven recommendations. In 2011, the CFRT, which oversees the review of all child deaths in Arizona, formed the Maternal Mortality Review Subcommittee (MMRS) to review all pregnancy-associated deaths, to identify factors that may prevent maternal mortality and make recommendations for system changes. Reviews are conducted to analyze the manner and cause of each death and to identify key factors of preventability. The Department of Health Services (DHS) aids both the CFRT and the MMRS, manages the CFRT database and provides administrative support through community partnerships.

Current statute defines *maternal fatalities associated with pregnancy* as the death of a woman while she is pregnant or within one year after the end of her pregnancy ([A.R.S. § 36-3501](#)). *Maternal morbidity* refers to physical or mental illness or disability directly related to pregnancy or childbirth.

There is no anticipated fiscal impact to the state General Fund associated with this legislation.

Provisions

1. Establishes the Committee to recommend improvements to information collection concerning the incidence and causes of maternal fatalities and severe maternal morbidity.
2. Requires the Director of DHS to appoint members to the Committee and requires that the Committee consists of the following members:
  - a) the Director of DHS or their designee who will serve as chairperson of the Committee;
  - b) a representative of a contractor from each geographic service area designated by the Arizona Health Care Cost Containment System (AHCCCS);
  - c) a representative of AHCCCS;
  - d) a representative of Indian Health Services;
  - e) three licensed obstetricians, two of whom must be licensed maternal fetal medicine specialists;

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- f) a certified nurse midwife;
- g) two representatives of nonprofit organizations that provide education, services or research related to maternal fatalities and morbidity;
- h) a representative of Arizona's health information organization;
- i) a representative of a public health organization; and
- j) two representatives of organizations that represent hospitals in Arizona.

3. Specifies that one Committee member must be from a county with a population of less than 500,000.
4. Directs the Committee to submit a report with recommendations concerning the improvement of information collection on the incidence and causes of maternal fatalities and severe maternal morbidity to the chairpersons of the House of Representatives (House) and Senate Health and Human Services Committees, or their successor committees, by December 31, 2019.
5. Requires DHS to submit a report to the Governor, the Speaker of the House and the President of the Senate and provide a copy to the Secretary of State on the incidence and causes of maternal fatalities and morbidity that includes all readily available data through the end of 2019.
6. Repeals the Committee reporting requirement on July 1, 2020, and the DHS reporting requirement on July 1, 2021.
7. Becomes effective on the signature of the Governor, if the emergency clause is enacted.

Amendments Adopted by Committee

1. Adopted the strike-everything amendment.
2. Requires that one Committee member be a representative of Arizona's health information organization.

Amendments Adopted by Committee of the Whole

1. Requires that one of the members of the Committee must be from a county with a population of less than 500,000.
2. Makes a technical change.

Senate Action

HHS            1/30/19    DPA/SE    8-0-0

Prepared by Senate Research

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CRS/AG/kja